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## UTILITY PATENT APPLICATION TRANSMITTAL

First Named Inventor or Application Identifier

Zip Code

Fax

Attorney Docket No.

35.C13949

YOSHIYUKI IMANAKA (Conly for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No. Assistant Commissioner for Patents APPLICATION ELEMENTS **ADDRESS TO: Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form Microfiche Computer Program (Appendix) (Submit an original, and a duplicate for fee processing) 7. Nucleotide and/or Amino Acid Sequence Submission Χ Specification Total Pages 62 (if applicable, all necessary) Computer Readable Copy Total Sheets Drawing(s) (35 USC 113) 12 Paper Copy (identical to computer copy) Statement verifying identity of above copies Oath or Declaration Total Pages Newly executed (original or copy) ACCOMPANYING APPLICATION PARTS Unexecuted for information purposes Assignment Papers (cover sheet & document(s)) Х Copy from a prior application (37 CFR 1.63(d)) 37 CFR 3.73(b) Statement (for continuation/divisional with Box 17 completed) Power of Attorney (when there is an assignee) [Note Box 5 below] **DELETION OF INVENTOR(S)** English Translation Document (if applicable) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Copies of IDS Information Disclosure Statement (IDS)/PTO-1449 Citations Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being 12. Preliminary Amendment part of the disclosure of the accompanying application and is hereby incorporated by reference therein. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Small Entity Statement filed in prior application Statement(s) Status still proper and desired Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation Continuation-in-part (CIP) of prior application No. \_\_\_/\_ Divisional 18. CORRESPONDENCE ADDRESS 05514 Х Correspondence address below Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) NAME

State

Telephone

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	212-20 =	192	X \$ 18.00 =	\$3456.00
	INDEPENDENT CLAIMS (37 cfr 1.16(b))	6-3 =	3	X \$ 78.00 =	\$ 234.00
	MULTIPLE DEPENDEN	IT CLAIMS (if applicable) (37	CFR 1.16(d))	\$260.00 =	\$ 260.00
				BASIC FEE (37 CFR 1.16(a))	\$ 760.00
	Total of above Calculations				\$4710.00
	Reduction by				
				TOTAL =	\$4710.00
9. Sm a. b. c.	A small er and desire	entity statement is enclose ntity statement was filed in ed. per claimed.		al application and sucl	n status is still proper

A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

Fees required under 37 CFR 1.16.

Fees required under 37 CFR 1.17.

Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	David L. Schaeffer, RN32,716	
SIGNATURE	David Jahaeter	
DATE	10/25/99	

The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No.  $06-1\underline{205}$ :

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